Overview

Introduction

Education is an integral part of the WIC program. This chapter covers participant education and staff training.

In This Chapter

This chapter is divided into ten (10) sections and seven (7) appendices which detail program education, nutrition education for participants, breastfeeding promotion, education for staff and how to report the cost of nutrition education.

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ORIGINAL: MARCH 1997

Overview (Continued)

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ORIGINAL: MARCH 1997

Section A Program Education for Participants

Certification

At certification appointments, participants will receive or experience the following:

- An explanation of the procedures used to assess risk
- An explanation of WIC rules and regulations, participant responsibilities, WIC foods, and the proper use of food instruments
- An emphasis on the positive, long-term benefits of nutrition education. At the time of certification, Local Agency staff will stress the positive, long-term benefits of nutrition education activities. However, individual participants shall not be denied supplemental foods for failure to attend or participate in nutrition education activities
- Mandatory referral to services

Proxies

When a proxy picks up food instruments for a participant, the proxy will be given an explanation of their responsibilities under WIC rules and how to use the WIC drafts.

Waiting Room

The area where participants wait for their WIC appointments will be a learning environment promoting messages related to nutrition, health, safety and civil rights.

ORIGINAL: MARCH 1997

Section B Nutrition Education for Participants/ Documentation of Nutrition Education

Policy

All participants will receive two (2) risk specific nutrition education contacts during a six (6) month certification. All caregivers of infants who receive WIC benefits >6 months will receive a nutrition education contact at least quarterly.

- The WIC certifier is responsible for the development and documentation of the Nutrition Education Contact in AIM on the Care Plan Screen
- Pregnant women will be counseled on the benefits of a healthy diet during pregnancy, as well as the benefits of breastfeeding. If the pregnant woman is on WIC >6 months, she will receive a minimum of one (1) nutrition education contact every three (3) months
- The WIC certifier will document nutrition education in the care plan screen by clicking in the Follow-Up/Nutr. Ed button and selecting one or more topics covered, from the "list of values" (lov) button.

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ORIGINAL: MARCH 1997

Section B Nutrition Education for Participants (Continued)

Basis of Education

Nutrition education will be provided to all WIC participants based on the protocols developed by the Office of Chronic Disease Prevention and Nutrition Services (OCDPNS), Arizona Department of Health Services (ADHS) and other accepted nutrition authorities.

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ORIGINAL: MARCH 1997

Section B Nutrition Education for Participants (Continued)

Nutrition Education Contact

Verbal communication includes individual or group interaction between WIC staff and participants such as discussions, summaries, and question and answer periods.

Mandatory referrals/participant orientation-program explanation requirements do not count as a nutrition education contact. Examples of mandatory referrals and program explanation requirements are listed below:

- Proxies
- Immunizations (for children 2 years and under)
- Referrals

Participant Orientation Program Explanation Requirements

- WIC Rules and Regulations
- How to use food instruments and overview of WIC foods
- Local resources for substance abuse treatment and counseling

During Management Evaluation (M.E.) or other site visits, the State Agency staff will monitor nutrition education to determine if:

- Information provided is accurate and up-to-date
- Information is individualized to meet participant's needs and considers the educational level, lifestyle and cultural beliefs of each participant
- Participant receives positive feedback to reinforce good nutrition habits
- A nutrition goal is set (or tailored in AIM) for the participant
- Participant/caregiver is involved in setting the goals
- Appropriate materials are used for education and provided to the participant

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Section B Nutrition Education for Participants (Continued)

Nutrition Education

Nutrition education means individual and group sessions and the provision of materials that are designed to improve health status and achieve positive dietary and **physical activity** habits, and that emphasize the relationship between nutrition, **physical activity**, and health, all in keeping with the **personal and cultural preferences** of the individual.

Local Agency Responsibilities

Local Agencies shall perform the following activities in carrying out their nutrition education responsibilities:

- Make nutrition education available to enter into an agreement with another agency to make nutrition education available to all adult participants, and to parents or caretakers of infant and child participants, and whenever possible, to child participants
- Provide nutrition education through the use of individual or group sessions
- Design and provide educational materials for Program recipients to education pregnant, postpartum, and breastfeeding women and parents or caretakers of infants and children participating in Local Agency services other than the program
- Develop an annual Local Agency nutrition education plan which is:
 - Consistent with the State's nutrition education component of Program operations
 - > In accordance with the information listed here
 - > As well in accordance with FNS guidelines
 - Approved by the State July 1 of each year

ORIGINAL: MARCH 1997

Section C Nutrition Education Care Plan

Policy

Each Local Agency will develop a Nutrition Education Care Plan and will submit a copy to the State Agency for approval by July 1 of each year.

Local Agencies will submit any modifications/updates to their plan annually.

Goals and Objectives

The Nutrition Education Care Plan will include goals and objectives for each target group (pregnant, postpartum and breastfeeding women, infants, and children), taking into account individual nutrition risks.

The Nutrition Education Care Plan will include methods and materials used to meet objectives for each contact and an evaluation component.

Population Needs

Nutrition Education Care Plans will be designed to meet the cultural, ethnic, language, and educational needs of the Local Agency's participant population.

Each Local Agency will specify in the plan how the special needs of the participant families will be met.

Breastfeeding Promotion

The Nutrition Education Care Plan will include the methods that will be used to promote breastfeeding to all pregnant women.

Immunizations

Local agencies will assess and refer for immunizations up to the age of two (2) years and document it in AIM.

Participant Satisfaction Survey

Annually, a participant satisfaction survey will be administered to participants, which includes questions about breastfeeding promotion and nutrition education provided.

Results of participant opinions will be used in the development of Local Agency nutrition education plans and breastfeeding promotion and support plans.

ORIGINAL: MARCH 1997

Section D High Risk Nutritional Consults

Purpose

Certain participants are identified as high-risk and have counseling needs beyond the scope of the CNW. These participants benefit from more in-depth counseling provided by a nutritionist.

Policy

All participants meeting the minimum high-risk criteria outlined below will be seen by the nutritionist during their current certification period.

High-Risk Referrals

Local Agencies will develop written procedures for CNWs to refer high-risk participants to a nutritionist.

The Local Agency will monitor and evaluate the procedures at least two times per year to ensure that it is effective.

Qualified Staff

WIC staff persons qualified to provide high-risk nutrition counseling must be a registered dietitian; or with oversight of an RD, a bachelor degree or higher in nutrition may counsel WIC clients.

Documentation of Education

The nutritionist will document the counseling session in the AIM system in the Care Plan Notes button, using the S.O.A.P. or other equivalent format, including at a minimum A: Assessment and P: Plan:

- S: Subjective Information
 - ✓ Information the participant gives
- O: Objective Information
 - ✓ Measurable information
 - ✓ Lab results, height, weight, Hgb, blood glucose, etc.
- A: Assessment
 - ✓ Nutritional assessment of participant
 - ✓ Interpretation of subjective and objective information as it relates to the participant's nutritional status
- P: Plan
 - ✓ Outline the plan to correct the problems indicated in the assessment portion
 - ✓ Follow-up information

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ORIGINAL: MARCH 1997

Section D High Risk Nutritional Consults (Continued)

Nutritionist Referral

When the participant no longer requires in-depth nutrition counseling provided by the nutritionist (For example, a premature infant who is now at the 50th percentile), the nutritionist will review the participant's chart and provide a nutrition care plan for the CNW to follow with specific criteria for referral back to the nutritionist.

High Risk No-Shows

They may receive monthly issuance of food instruments only, until they meet with the nutritionist.

High Risk Criteria

- 201: Anemia (all categories)
- 341: Nutrient Deficiency Disease (all categories)
- 101: Pre-pregnancy underweight (pregnant women)
- 131: Low maternal weight gain (pregnant women)
- 132: Maternal weight loss (pregnant women)
- 602/603: BF complications (BF women, infants)
- 142: Premature Infant (infants)
- 134: Failure to thrive (infants and children)
- 141: Low birth weight (infants)
- 302: Gestational Diabetes (pregnant women)
- 103: Underweight (infants and children)

Follow-up

The nutritionist's discretion shall be used to determine whether to continue to see the participant or to refer the participant back to the CNW. The nutritionist will document this in the Notes Section of AIM.

The Local Agency will develop written procedures providing the CNW with guidance for referral back to the nutritionist, as needed.

Continued on Next Page

ORIGINAL: MARCH 1997

Section D High Risk Nutritional Consults (Continued)

Documentation of Education

Local Agency staff will document in the Follow-up/ Nutrition Education button in the Care Plan screen of the AIM system. If problems in scheduling prevent a participant from attending group classes, individual education will be provided.

Proxies

Proxies should receive nutrition education for a participant when the proxy is a member of the participant's household or a caretaker of a child or infant participant. (A caretaker could be a regular day care provider, parent, grandparent or other relative).

Note: Friends, neighbors or relatives who do not ordinarily care for a participant or live with them may pick up food instruments for the participant, but will not receive nutrition education. The WIC staff should determine at the time of the appointment whether the proxy should receive nutrition education, depending on their role in caring for the WIC participant. The Authorized Representative will receive nutrition education at their next food instrument pick-up.

Diet Assessment

A completed dietary assessment for a participant is a tool for counseling on appropriate dietary habits.

ORIGINAL: MARCH 1997

Section E Breastfeeding Promotion – State Agency Responsibilities

Employ Staff

To ensure that all pregnant participants are encouraged to breastfeed unless it is contraindicated for health reasons, the State Agency will:

- Employ a designated Breastfeeding Promotion Coordinator
- Ensure that sufficient staff is available to administer an efficient and effective breastfeeding promotion program

Funding

The federal regulations require that agencies spend \$23 per pregnant and breastfeeding woman (average monthly number). Of that, the Local Agencies will target spending \$17 multiplied by the average number of pregnant and breastfeeding women. The State Agency will spend the other one-fourth for breastfeeding promotion.

The State will monitor the targeted budget through the annual time study.

Provide Training

The State Agency will provide in-service training opportunities for all WIC staff on breastfeeding.

Identify Resources

Identify and/or develop resources and educational materials for use in the Local Agencies.

Coordinate Statewide Activities

The Breastfeeding Promotion Coordinators will work with Local Agency Coordinators in developing a strategic plan to increase breastfeeding initiation rates and lengthen breastfeeding duration. Activities may include incentives for breastfeeding promotion, social marketing media messages, World Breastfeeding Week activities, Peer Counselor Programs, Hospital Certifications, and bulletins.

ORIGINAL: MARCH 1997

Section F Breastfeeding Promotion – Local Agency Responsibilities

Document Education

Document the breastfeeding education provided on the Followup/Nutrition Education button in AIM Care Plan screen of the AIM system for every pregnant or breastfeeding participant and their breastfed infant(s).

Provide Education

- Provide educational materials, classes, and displays, which include positive and accurate breastfeeding messages
- Provide breastfeeding promotion education for all new staff orientations. A 40-hour basic course such as the Certified Breastfeeding Counselor Course or similar is ideal for all WIC staff
- Offer periodic breastfeeding in-services to WIC staff to keep up with current knowledge

Breastfeeding Support

Develop or refer pregnant and breastfeeding participants to appropriate breastfeeding support services. La Leche League, Peer Counselors, or Lactation consultants are recommended.

Clinic Environment

Develop a clinic environment, which endorses breastfeeding as the preferred method of infant feeding, e.g., display breastfeeding posters, do not display formula or formula messages, and provide an area for mothers to breastfeed.

Promote Breastfeeding

Develop incentives to increase breastfeeding rates and lengthen breastfeeding duration. Incentive items may include shawls, breast pads, and other incentives as allowed through WIC breastfeeding incentive policy. Activities may include Peer Counselor programs, "baby showers," hospital visits, crib cards, World Breastfeeding Week (Aug. 1-7) activities and media announcements.

Promote breastfeeding among employees through contests, awards and employee breastfeeding policies.

Continued on Next Page

ORIGINAL: MARCH 1997

Section F Breastfeeding Promotion – Local Agency Responsibilities (Continued)

Evaluate Activities

Perform and document annual evaluations of breastfeeding education, promotion, and support activities.

Tailor Food Packages

A breastfeeding woman is encouraged to breastfeed exclusively for at least the first 6 months of her infant's life according to the American Academy of Pediatrics. The enhanced breastfeeding package, other incentives, not giving formula, and providing anticipatory guidance and support have each been proven helpful for successful breastfeeding.

An infant who is receiving both breast milk and infant formula is considered a breastfed infant by national WIC definition. However, knowing that formula decreases milk supply, WIC Certifiers will take care to tailor the formula food package to supply only the amount which the mother reports giving the infant. For example, an infant who is being supplemented with 2 ounces of formula a day should only be issued one can of powdered formula per month. As needs change, the food package for the infant should be changed to accommodate the mother's wishes, unless the change occurs in a month when the mother was issued an enhanced breastfeeding package for herself. Extra support or referral to a breastfeeding educator will be offered to any breastfeeding mother who requests formula.

ORIGINAL: MARCH 1997

Section G Breast Pump Loan/Distribution – State Agency Responsibilities

To ensure breastfeeding participants are encouraged to breastfeed through times of separation from their infants, the State Agency will:

Supply Pumps

Supply Local Agencies with manual and electric breast pumps as funding permits.

Solicit RFPs

Solicit Request(s) for Proposals (RFP's) for bid on manual and/or electric breast pumps and pump attachment kits.

Provide Education

Provide education for Local Agency staff on manual and electric breast pump assembly, use, sanitation and collection, storage and transport of human milk.

Identify Resources

Identify and/or develop resources and educational materials for use in Local Agencies.

Evaluate

Evaluate local breast pump loan procedures.

Referral

Refer local WIC staff to manufacturer for maintenance of manual and electric breast pumps.

- Medela: 1-800-TELL-YOU
- Ameda-Egnell (Hollister): 1-800-323-8750
- Call the state Breastfeeding Promotion Consultant for the number of other manufacturers

ORIGINAL: MARCH 1997

Section H Breast Pump Loan/Distribution – Local Agency Responsibilities

Policy

- All candidates for Breast Pump Loans will be WIC participants.
- Candidates for Breast Pump Loans will be screened and evaluated by trained staff.

The Local Agency will ensure that:

Manual Pumps

Manual breast pumps are for the use of one participant only and are not returnable. They are suitable for periodic use only.

Documentation

Staff documents distribution on a log, of the manual breast pumps <u>given</u> and electric breast pumps <u>loaned</u> to participants, as well as education given on the use, assembly and sanitation.

Electric Breast Pump Loan/Release Form

Local Agencies will use a "Breast Pump Loan/Release Form," for the loan of electric breast pumps, which includes the following:

- Pump Model Number
- Participant information
- Reason for loan
- Date loaned
- Date returned
- Instruction on use of pump, sanitation, storage
- Instruction on hand expression

Note: See Appendix C for sample form

Continued on Next Page

ORIGINAL: MARCH 1997

Section H Breast Pump Loan/Distribution – Local Agency Responsibilities (Continued)

Trained Staff

Trained staff will evaluate the need for an electric breast pump based on the severity of participant's problem/need, and/or by Nutritionists' discretion.

Waiting List

Local Agencies will have a designated waiting list for electric breast pump loans.

Participant Instruction

The participant will be instructed on her responsibilities for any breast pump loaned.

Trained staff will provide and document instruction to the participant on proper use and care of manual and electric breast pumps, sanitation and storage of breast milk and hand breast milk expression.

Monitoring of Loans

Local Agencies will monitor electric breast pumps monthly while on loan.

Returned pumps and all non-disposable accessories will be sanitized by the clinic. Tubing and kits cannot be reused.

Return of Electric Breast Pumps

The participant will return the electric breast pump to the Local Agency for any of the below reasons:

- On the date specified on breast pump loan/release form
- When the breastfeeding situation changes
- At the request of nutritionist

Return of Manual Breast Pumps

Manual breast pumps will not be returned or exchanged.

Pumps Not Returned

If an electric breast pump is not returned by designated date, a "letter of concern" will be sent to the participant requesting the return of the pump. (See Appendix D). If there is no response to the "letter of concern," the State Agency will take further action with a Local Agency request.

ORIGINAL: MARCH 1997

Section I Arizona WIC Peer Counselor Program

Overview

"Using Loving Support to Implement Best Practices in Peer Counseling" is a training and technical assistance project designed to assist the national effort by the USDA, Food and Nutrition Service (FNS) to build and enhance peer counseling programs. Combining peer counseling with the on-going breastfeeding promotion efforts in WIC has the potential to significantly impact breastfeeding rates among WIC participants, and, most significantly, increase the harder to achieve breastfeeding duration rates. The long-range vision of the USDA/FNS is to institutionalize peer counseling as a core service in WIC.

Goals

The overall goals of all WIC breastfeeding projects, including the Peer Counseling project, are to:

- Increase the incidence of breastfeeding to 75% of women initiating breastfeeding upon the birth of their babies
- Increase the duration of breastfeeding to 50% of women for the first 6 months of their baby's life and 25% of women for the first year of their baby's life
- Increase WIC participants knowledge of the advantages of breastfeeding
- Develop community partnerships to maximize resources and increase effectiveness of community support efforts

ORIGINAL: MARCH 1997

Section I Arizona WIC Peer Counselor Program (Continued)

Allowable Costs

Allowable costs include:

- Compensation for peer counselors and designated peer counselor manager/coordinators
- Training
- Telephone expenses for participant contacts
- Travel for home and hospital visits
- Recruitment of peer counseling staff
- Demonstration materials (e.g., breastpumps for demonstration purposes, videos)
- Written materials

Note: Written materials provided in the peer counseling program are paid for with State NSA funds.

State Peer Counseling Coordinator

ADHS/OCDPNS will house the Peer Counseling Coordinator who will oversee the implementation of the state Peer Counselor plan and projects. The Coordinator will be someone with formal breastfeeding training, personal breastfeeding experience, and experience working with the WIC population. This position will work closely with the State Breastfeeding Coordinator and State WIC program staff.

Peer Counselor

A paraprofessional, recruited and hired from the target population, and who will be available to WIC clients outside of usual clinic hours and outside of the WIC clinic environment. The ideal Peer Counselor will have enthusiasm and previous experience with breastfeeding (at least 6 months of exclusive breastfeeding), will have similarities with the WIC population the program serves (including similar age, ethnic background, and language spoken), and will be a current or previous WIC participant.

Continued on Next Page

Section I Arizona WIC Peer Counselor Program (Continued)

Compensation/ Reimbursement

It is strongly recommended that peer counselors be paid employees, rather than volunteers. Providers must also cover travel expenses for home and hospital visits, required trainings, and reimbursements for telephone and other expenses.

Scope of Practice

Job parameters should include but are not limited to:

- Telephone contacts from peer counselor's home and clinic
- Home and hospital visits
- Support groups
- Support availability beyond usual WIC office hours.

Training

Trainings to include:

- The Loving Support Through Peer Counseling training will be used to provide trainings to the peer counselors
- WIC clinic staff in peer counseling programs will receive the PowerPoint presentation "Peer Counseling: Making a Difference for WIC Families" through the Loving Support curriculum at least one time per clinic during each year of the contract
- Additional Trainings for Peer Counselors and WIC staff will include cross-training of peer counselors to familiarize them with WIC services, breastfeeding training for WIC Staff, etc.

Referral Protocol

Using the parameters set in the Loving Support Curriculum, peer counselors need to refer participants to a lactation consultant or medical professional if additional support is needed.

Documentation Requirements

Peer Counselors should use the Peer Counselor Contact Log found in the Loving Support materials or similar document to record all contacts.

Continued on Next Page

Section I Arizona WIC Peer Counselor Program (Continued)

Confidentiality

Peer Counselors must sign a confidentiality agreement before providing services.

Financial Reporting

Monthly Contractor's Expenditure Reports are due the 15th of each month, reflecting expenses that occurred in the previous month: and

Program Reports

Quarterly reports are due the 15th of the month after the end of each quarter and should include:

- Number and types of peer counseling contacts
- Total number of hours worked by peer counselors, peer counselor turnover and reasons for turnover
- Types of trainings provided to peer counselors
- Breastfeeding rates for peer counseling supported WIC clinics
- Referrals to lactation consultants or other health professionals
- Community partnership activities
- Quality control items such as feedback form participants, follow-up phone call results, performance review results, etc.

Monitoring

The State Peer Counseling Coordinator will conduct monitoring/technical assistance visits quarterly.

Records Retention

Records shall be maintained and available for program audit. Records shall be kept for five (5) years total, including the contract year.

ORIGINAL: MARCH 1997

Section J Education for Professional and Paraprofessional Staff

Ensuring Competence

Local Agencies will ensure competence of all paraprofessionals who certify or prescribe food packages for WIC participants.

Available Resource

The State Agency provides competency-based training through WIC University. If Local Agencies do not send staff to the WIC University, the Local Agency will be responsible for training paraprofessionals as certifiers using competencies outlined in Appendix B.

WIC University

The State Agency has developed a four-tier approach to the training professional and paraprofessional staff. WIC University provides WIC 100 for new clerks, WIC 101 for new certification staff, WIC 201 for Nutritionists, and WIC 301 for WIC Directors as described in Appendix A.

Staff Evaluation

Local Agencies will evaluate staff performance annually. The supervisor will complete an annual evaluation of each employee. The completed employee evaluation will be maintained in the employee's file (see Appendix E). Key areas of evaluation include:

- Nutritional counseling
- Breastfeeding counseling and promotion
- Customer Service

Continued on Next Page

ORIGINAL: MARCH 1997

Section J Education for Professional and Paraprofessional Staff (Continued)

Education Plan

Local Agencies will provide forty-eight (48) hours of documented training for each staff member in each fiscal year. Although some level of training will be conducted each quarter, training does not have to be evenly distributed over the four quarters of the fiscal year.

At least thirty-six (36) hours of nutrition education will be in:

- Nutrition risk
- Breastfeeding
- Counseling

An additional twelve (12) hours of WIC related education will be provided on the following:

- Civil Rights training is required annually for all staff
- It is required by the USDA that Local Agencies incorporate task-appropriate breastfeeding promotion and support training into orientation programs for new staff involved in direct contact with WIC clients
- Local Agencies must also have a plan to ensure that women have access to breastfeeding promotion and support activities during the prenatal and postpartum periods

Other training may also include topics such as:

- Program rules
- Food instrument issuance
- Referral procedures
- Computer skills
- Customer service
- Car seat safety
- Personal safety

Continued on Next Page

Section J Education for Professional and Paraprofessional Staff (Continued)

Agency Training Files

Each Local Agency will maintain a record of all continuing education provided, in a central file.

Central training files will include:

- Agenda, outline and teaching materials used for local inservice training provided
- A list of participants, speakers, date and time spent in training
- Agenda and outline of meetings which Local Agency staff attend (e.g., Annual Nutrition Education Conference, Statewide Staff Meetings)

Current training files for each paraprofessional will include:

Staff Training Files

- A summary of needs, based on job functions, updated annually
- A completed competency Certification Checklist with dates of training and evaluation results (See Appendix F)
- Documentation of training provided

Documentation of Training

Documentation consists of a list of dates, topics presented and time spent in training. Date and time summaries will be separated by fiscal year, verifying the required forty-eight (48) hours per year has been provided. Documentation comprises copies of pre-and post-tests or other methods of evaluation. Also included is documentation of follow-up training, when required (e.g., if competency is not met).

Note: The name of the workshop or in-service training is sufficient when the agenda and training outline are retained in the Local Agency training file.

ORIGINAL: MARCH 1997

Section K Nutrition Education Resources

Brochures

Brochure copies are available through the State Pamphlet Resource Catalog WIC order form. (See Appendix G)

Flyers

Arizona WIC Approved Food List

Care Plan

The care plans available through the AIM system will be used to support nutrition education.

Training Manual

Arizona WIC Program Training Manual (2005) consists of:

- WIC 100 (Training Manual for Clerks)
- WIC 101 (Training Manual for WIC Certifiers)
- WIC 201 (Training Manual for WIC Nutritionists)
- WIC 301 (Training Manual for WIC Directors)

Lab Manual

Lab Procedure Manual (2004)

Dietetic Education Program

The Dietetic Education Program (DEP) is a two-year college program approved by the American Dietetic Association for the training of dietetic technicians in the delivery of nutrition care services. Graduates of the program receive an Associate of Applied Science degree from Central Arizona College.

- DEP utilizes competency based, self-paced modules and is available to local WIC agencies for the training of paraprofessionals
- Local Agencies may provide paid time for employees to work on DEP modules or group time for DEP classes. This time, when documented, applies to the 48 hours of continuing education required per employee each year
- The State Agency may fund full or partial tuition for Local Agency staff when requested

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ORIGINAL: MARCH 1997

Section K Nutrition Education Resources (Continued)

Program Incentives

The United States Department of Agriculture (USDA) allows the state, when funds are available, to purchase incentive and outreach items for WIC. The items would be used for teaching health messages or to inform people about the WIC program. They would not promote a certain Local Agency's logo or be items that would be seen or used just by staff. Items should include the State 1-800-2525-WIC number (1-800-252-5942).

These items are allowable for three purposes: outreach, breastfeeding promotion, and nutrition education.

An example of an incentive item currently provided by the Arizona Department of Health Services is the Breastfeeding shawls.

Program incentive items for Nutrition Education should:

- Be targeted to participants
- Contain a WIC-approved nondiscrimination statement for publications or other printed material that also include any program information
- Have a clear and useful connection to particular WIC nutrition education messages
- Either convey enough information to be considered educational or be utilized by participants to reinforce nutrition education contacts
- Have value as nutrition education aids that equal or outweigh other uses
- Be distributed to the audience for which the items were designed (e.g., tippy cups distributed to mothers of infants who are learning or will be learning to drink from a cup during a relevant nutrition education contact)
- Be reasonable and necessary costs

Other examples include calendars that contain important nutrition education messages and refrigerator magnets with nutrition or breastfeeding information on them.

Continued on Next Page

ORIGINAL: MARCH 1997

Section K Nutrition Education Resources (Continued)

Program Incentives (Continued)

Program incentive items for Breastfeeding Promotion and Support should:

- Contain a WIC-approved nondiscrimination statement for publications or other printed material that also include any program information
- Have a clear and useful connection to promoting and supporting breastfeeding among current WIC participants
- Either convey information that encourages and supports breastfeeding in general, informs participants about the benefits of breastfeeding, or offers support and encouragement to women to initiate and continue breastfeeding
- Have value as breastfeeding promotion and support items that equal or outweigh other uses
- Be distributed to the audience for which the items were designed
- Be reasonable and necessary costs

Examples include: t-shirts, buttons or other items of nominal value with a breastfeeding promotion or support message (e.g., "Breast Fed is Best Fed").

Careful consideration should be given to the public perception of funds spent on items. Like any other administrative cost, these expenditures are subject to review, audit, and public scrutiny. WIC should be prepared for public challenges and be able to justify their incentive expenditures.

It is mandatory in WIC, that the clinics create a positive environment that endorses breastfeeding as the preferred method of infant feeding.

Each local agency must have a designated staff person to coordinate breastfeeding promotion and support activities.

It is required by the USDA that local agencies incorporate taskappropriate breastfeeding promotion and support training into orientation programs for new staff involved in direct contact with WIC clients. Local agencies must also have a plan to ensure that women have access to breastfeeding promotion and support activities during the prenatal and postpartum periods.

ORIGINAL: MARCH 1997

Appendix A: Professional and Paraprofessional Training Dates

See Following Page

Arizona WIC Program Professional and Paraprofessional Training Schedule FY2005

WIC 100	WIC 101	WIC 201	WIC 301
September 14-15, 2005	August 23-25, 2005	September 7-8, 2005	November 6-9, 2005
November 16-17, 2005	October 25-27, 2005		
	December 6-8, 2005		
February 8-9, 2006	January 24-26, 2006	January 11-12, 2006	May 9-10, 2006
May 17-18, 2006	February 21-23, 2006	April 5-6, 2006	
July 26-27, 2006	May 23-25, 2006	July 12-13, 2006	
	June 27-29, 2006		
	July 18-20, 2006		

All classes will be held at the Arizona WIC Program Training Room, 1740 W. Adams, Phoenix, AZ 85007.

Appendix B: Competencies

See Following Pages

Staff Training Competencies WIC 100 – Clerk Training

WIC 100 Competencies		
To describe the purpose of the WIC program and identify eligibility criteria	12. To describe the clerk role in providing good customer service	
2. To successfully logon to the AIM System	To describe common anthropometric, medical, medical, and dietary risks	
To correctly identify and appropriately utilize the different parts of the AIM System windows	14. To understand the clerk role in promoting good clinic flow	
4. To successfully navigate through the AIM System	15. To understand the clerk role in handling customer complaints and civil rights complaints	
5. To accurately perform a query	16. To understand that WIC is a national program administered by the USDA	
6. To successfully utilize appropriate help functions	17. To select a proper nutrition education plan for a client based on client needs	
7. To successfully pre-certify a client	18. To understand and assign the appropriate food package for a client	
8. To successfully transfer in-state and out-of-state clients	19. To successfully print and distribute food instruments	
9. To schedule a new appointment	20. To successfully void and reissue food instruments	
10. To print an appointment notice	21. To understand and successfully run appropriate reports	
To describe the clerk role in supporting/promoting breastfeeding		

Staff Training Competencies WIC 101 – Certifier Training

WIC 101 Competencies		
To describe the purpose of the WIC program and identify eligibility criteria	12. To describe the clerk role in supporting/promoting breastfeeding	
2. To successfully logon to the AIM System	13. To correctly identify the guidelines for weighing and measuring clients	
To correctly identify and appropriately utilize the different parts of the AIM System windows	14. To describe common anthropometric, biomedical, medical, and dietary risks	
4. To successfully navigate through the AIM System	15. To successfully understand and perform a 24-hour diet recall using the screening tool	
5. To accurately perform a query	16. To successfully complete a diet assessment	
6. To successfully utilize appropriate help functions	17. To create a client care plan based on client information	
7. To successfully pre-certify a client	18. To select a proper nutrition education plan for a client based on client needs	
8. To successfully transfer in-state and out-of-state clients	19. To understand and assign the appropriate food package for a client	
9. To schedule a new appointment	20. To successfully print and distribute food instruments	
10. To successfully determine and document income eligibility using the Income Calculator	21. To successfully void and reissue food instruments	
11. To print an appointment notice	22. To understand and successfully run appropriate reports	
	23. To demonstrate their skills to provide nutrition education to WIC participants through role play	

Staff Training Competencies WIC 201 – Nutritionist Training

	WIC 201 Competencies		
1.	To understand WIC history, mandates, categories, priorities, targeting populations, role of USDA, State office and Local Agency Nutritionists	To correctly order nutrition education handouts and supplies	
2.	To understand and describe WIC risk factors	To provide breastfeeding support, including pumps, incentives, referrals, and education	
3.	To develop effective client care plans and interventions	10. To conduct accurate internal audits	
4.	To provide effective counseling to WIC clients, especially high risk clients	To develop quality staff in-services for continuing education	
5.	To accurately assess client dietary intake	12. To develop effective outreach activities for the targeted audience	
6.	To appropriately authorize special formulas	To appropriately handle customer complaints and civil rights complaints	
7.	To correctly run AIM reports		

Staff Training Competencies - WIC 301 Director Training

	WIC 301 Competencies			
1.	To prepare program budget (contract) proposals, participate in contract negotiations, and monitor compliance	To manage clinic operations: Load clinic hours, altitudes and schedules in AIM		
2.	To manage caseload and priority distribution with an outreach plan, appointment scheduling, waiting lists, and waiting lists sorted by priority	19. To understand and follow federal processing standards		
3.	To submit reports and revisions in a timely manner according to the AZ P&P manual, "Financial Management" chapter	20. To ensure separation of duties in Local Agency clinics		
4.	To understand process for submitting CER's	21. To appropriately resolve client complaints		
5.	To order forms and supplies from the ONS Administrative Support Supervisor at the State WIC office	22. To develop an appropriate outreach plan		
6.	To submit inventory list annually	23. To update and confirm referral lists		
7.	To obtain State approval prior to purchasing capital equipment as defined in \underline{AZ} $\underline{P\&P}$	24. To develop a Nutrition Care Plan for each risk factor, including the procedures for identifying high risk clients and documentation of an internal referral process		
8.	To understand the community needs assessment for vendor authorizations	25. To develop procedures for internal referrals to nutritionist		
9.	To develop, implement and monitor procedures to ensure food instrument security and accountability	26. To develop and update Local Agency WIC P&P manual		
10	. To ensure the accuracy of food instrument issuance and redemption training	27. To document and maintain files according to the <u>AZ P&P</u> , "Records and Reports" chapter		
11	. To ensure that maximum levels of food are not exceeded	28. To understand Community Nutrition Team Programs and Services		
12	. To refer all vendor requests/complaints/issues to the State Agency for follow-up	29. To identify Healthy Arizona 2010 Nutrition Objectives		
13	. To follow-up on all vendor complaints regarding participants that are forwarded to you by the State Agency	30. To understand the role of the AIM system		
14	. To notify the State Agency of all claims of lost and/or stolen food instruments	To understand Children's Rehabilitative Services, Early Intervention Program, and High Risk Prenatal Services		
15	. To complete and submit the Redemption Error Report by due date	31. To appropriately use AIM management functionality		
16	. To develop and perform quality assurance reviews or other continuous quality improvement program regularly	32. To provide daily staff supervision		
17	. To prepare and present an annual review/evaluation for each staff member	33. To understand how to run AIM reports		

Appendix C: Electric Breast Pump Loan/Release Form

See Following Page

Electric Breast Pump Loan/Release Form

WIC ID#		Pump #	
Date Loaned		Date Returned	d
Name			_
Address			_
City/State/Zip			_
Home Phone		Work Phone	
Two ID Numbers	Social Security #		
	Social Security #		Drivers License #, State
Address			_
City/State/Zip			_
Expected Date of	Return		_
PRIORITY	ı	REASON FOR LOA	AN
I.	Mom and Baby Separ	ation Due to Medic	al Need
II.	Mom and Baby Separa	ation Due to Work/	School Schedule
III.	Mom with Special Nee	eds/Problems (infec	tion, surgery)
IV.	Mom with Supply Prob	olems/Breast Rejec	tion/Latch-on Problems
	GIVEN TO PARTICIPA		
	use	Storage of bre	east milk
	ng		
Hand expression		(Helpful Hints	for Breastfeeding pamphlet)
FINAL OUTCOM			
	used the pump for		
Mom discontinue	d use of the pump due	to	
			tate of Arizona Department
			e caused by the use of this
			tand that I must return this
pump in clean an	d usable condition or re	eplace it at a cost o	f \$
Participant Signa	ture	D	ate
Loaned by		D:	ate

Appendix D: Letter of Concern

nte:
ear:
e are sorry you missed your last WIC appointment on Although we have made several empts to call you, we have not been able to reach you. We are in need of the electric breast mp/accessories loaned to you on On the "Electric Breast Pump Loan Agreement" that u signed, you agreed to return the pump/accessories on or be subject to financial
nalty.
ease call us at If we have not heard from you by, we will assume the mp/accessories are lost or you do not intend to return them and you will be asked to pay to replace the mp/accessories.
e sincerely hope to hear from you soon.
gnature
ime of Agency
dress of Agency
ry, State, Zip Code
ency Telephone Number

Appendix E: Local Agency Staff Evaluation Certification Observation Checklist: Client Education



Arizona WIC Program Certification Observation Checklist: Client Education

Reviewer:	_Date:
Agency:	_Site:

All items on the checklist do not have to be covered in order.

CNW Participant ID No. Category Certification or Mid-Cert Health Check Staff used appropriate interviewing techniques? ✓ Introduced self ✓ Explained purpose of interview ✓ Asked open-ended questions ✓ Actively listened ✓ Involved the client ✓ Addressed potential problems/ barriers Eligibility criteria explained (income, category, nutritional risk). Consent Release Explained & Signed prior to anthropometric intake Voter Registration ✓ Offered and recorded appropriately. Medical Information ✓ Lab procedures: Good patient care observed (ID's reassured participant) ✓ Use weight gain grid or growth charts for education — Health History Information ✓ Questions appropriately asked (leading questions). Immunizations ✓ Reviews and discusses immunization status. WRO Policy Memo 2001- WRO Policy Memo 2001- WRO Policy Memo 2001-	ITEM	1	2	3	4	5	Policy
Category Certification or Mid-Cert Health Check Staff used appropriate interviewing techniques? Introduced self Explained purpose of interview Asked open-ended questions Actively listened Involved the client Addressed potential problems/ barriers Eligibility criteria explained (income, category, nutritional risk). Consent Release Explained & Signed prior to anthropometric intake WRO Policy Voter Registration Offered and recorded appropriately. Medical Information Lab procedures: Good patient care observed (ID's reassured participant) Use weight gain grid or growth charts for education Health History Information Cuestions appropriately asked (leading questions). Reviews and discusses immunization status. WRO Policy Memo 2001-	CNW						
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✓ Addressed potential problems/ barriers Eligibility criteria explained (income, category, nutritional risk). Consent Release Explained & Signed prior to anthropometric intake Ch 9 Sec A 246.7(h)(2) Voter Registration WRO Policy Memo 800-D ✓ Offered and recorded appropriately. Medical Information ✓ Lab procedures: Good patient care observed (ID's reassured participant) ✓ Use weight gain grid or growth charts for education ✓ Lealth History Information Questions appropriately asked (leading questions). Immunizations ✓ Reviews and discusses immunization status. ✓ Referrals & education as necessary. WRO Policy Memo 2001-							
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Voter Registration WRO Policy Memo 800-D Medical Information ————————————————————————————————————							
✓ Offered and recorded appropriately. Memo 800-D Medical Information ✓ ✓ Lab procedures: Good patient care observed (ID's reassured participant) ✓ ✓ Use weight gain grid or growth charts for education ✓ Health History Information ✓ ✓ Questions appropriately asked (leading questions). ✓ Immunizations ✓ ✓ Reviews and discusses immunization status. ✓ ✓ Referrals & education as necessary. WRO Policy Memo 2001-							
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✓ Referrals & education as necessary. WRO Policy Memo 2001-	Trovious and disodesses initialization						
Memo 2001-							WDO D II
	✓ Referrals & education as necessary.						
							Niemo 2001- 7



ITEM	'	leipin 1	g Arizor	a Fan		Grow	Strong	3			1			Г		Dollov
Tabasas		ı			2			3			4			5		Policy
Tobacco ✓ Reviews/Discusses and makes appropriate referrals as necessary.																
Notes																
Recorded. (if applicable)																Ch 3
<u>Dietary Assessment</u> (self-administered or CNW interview)																Appendix C
✓ If self-administered, client questions were addressed and client was given sufficient instructions.	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	
✓ If CNW interview, CNW asked open- ended questions.																
 Amounts of food consumed ascertained, if appropriate. 																
✓ Results explained to participant.	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	
Client was asked about vitamin/mineral supplementation & info recorded correctly.																
 Care Plan/Nutrition Education ✓ Appropriate nutrition education. Engaged participant and used active listening skills. 	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	Ch 9 Sec B 246.11
✓ Used food models/props to establish serving sizes.	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	
✓ Goals tailored.	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	
✓ Prioritize and structure counseling to cover greatest nutritional needs &/or client's interests.	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	
✓ Promotes/supports BF for PG/PP women.	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	Ch 9 Sec D1
 Mandatory referrals and those needed by client were made & recorded. 	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	Ch 8 Sec F 246.7
✓ Appropriate materials given.	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	
Appropriate next appt. type.																
R & R/Foods																246.7(h)(2)
✓ Proxy procedure explained.																Ch 9 Sec A 246.2; 246.12(r)(1- 4)
 Client given opportunity to ask questions. 																

 $\sqrt{\ }$ = Complete --- = Not done N/A = Not applicable X = Incorrectly done Scale: 1= below standard; education not focused on client needs/inaccurate info; 2= standard; 3= above standard; in-depth/accurate info



	Helping Arizon	na Families Grow				
ITEM	1	2	3	4	5	Policy
Nutrients in WIC foods were discussed.						
Food Package						Ch 5 Sec H
✓ Tailored appropriately for participant.						246.10
VOC/ID folder						
✓ Rights and Responsibilities signed and						Ch 4 Sec C
explained including discrimination						
complaint review.						
✓ WIC ID folder reviewed, explained,						Ch 4 Sec H
signed, and provided to client.						
Food instrument education discussion						Ch 7
<u>included</u>						
✓ Authorized food list.						
✓ Authorized vendor list.						Ch 7 Sec B2
✓ Separate WIC foods by food instrument						Ch 7 Sec B2
from other foods at checkout.						
✓ Inform cashier you are using WIC food						Ch 7 Sec B2
instruments.						
✓ Present food instruments & ID folder to						Ch 7 Sec B2
cashier.						
✓ Verify amount & date of use recorded						Ch 7 Sec B2
on food instrument.						
✓ After amount & date used are correctly						Ch 7 Sec B2
filled out, sign the food instrument.						
✓ Bi-monthly/tri-monthly issuance						Ch 7 Sec B2
explained.						
✓ Use food instrument after issue date						Ch 7 Sec B2
and before void date.						
✓ Participant complaint card- explain and						Ch 7 Sec B2
provide. (1 for each month of checks)						Policy Memo
No contract of the standard of						2003#1
No exchanges for cash, non-authorized						
food items or credit.						
Food Instrument						Ch 7 Sec B1
FI's for 2 nd and 3 rd months placed in						CIT / SCC BT
new, dated envelopes						
Team Customer Service ✓ Provides clear instructions and						
explanations without WIC lingo.						
✓ Uses polite and customer-friendly manner.						
✓ Performs in a knowledgeable manner.						
Treat participant with respect.						
rreat participant with respect.						



ITEM	1	2	3	4	5	Policy
✓ Deal effectively with upset/emotional participant.						
✓ Sensitive to participant's language needs.						
✓ Collect data with non-biased techniques						
PROGRAM INTEGRITY						
Ensures confidentiality of information						
Staff logging out of AIM when away from						
terminal						24/ 11/2///
CULTURAL COMPETENCE						246.11(e)(6)
Staff consider client's nutritional						
needs/interests, household situation and cultural & religious values/preferences, literacy level and language spoken	1 2 3	1 2 3	1 2 3	1 2 3	1 2 3	



Participant Name/ID#	Explanation of Findings

Appendix F: Local Agency Staff Training Certification Observation Checklist: Technical Skills



Arizona WIC Program Certification Observation Checklist: Technical Skills

Reviewer:	Date:
Agency:	Site:

Item	1	2	3	4	5	Policy
CNW						,
De district ID No.						
Participant ID No.						
Category						
Certification or						
Mid-Cert Health Check						
AIM INTEGRITY						
Identification & Identifiers						
✓ If more than one participant, family processing used.						
✓ If first certification, proof of ID was provided & recorded correctly. If previously certified by AZ WIC, ID folder serves as ID.						Ch 1 Sec A
Residency ✓ Proof of residency was provided & recorded correctly.						Ch 1 Sec B
Voter Registration ✓ Recorded appropriately.						
Race/Ethnicity ✓ Race and ethnicity data collected accurately.						
Income ✓ Client was asked to provide proof of participation in AHCCCS, Food Stamps, TANF.						Ch 2 Sec B
Proof of income was provided, calculated, and recorded correctly.						Ch 2
Dual Participation ✓ Checked in AIM						246.7(h)(1)
Medical Information						246.7(e)
✓ Correct assessment date recorded.						
✓ Ht/Wt recorded accurately.						Policy memo FY 2005 policy 2
✓ Medical data <60 days old✓ Blood Values recorded accurately.						Policy



	Helping A	Arizona Families Gro				
Item	1	2	3	4	5	Policy
Appropriate alternate code used, if						clarification
applicable:						memo 2005
Hgb 99.5= pending (give one month);						
99.6= hemophilia or religion prevents						
draw; 99.7= blood work is not required at						
this cert; 99.8= draw will create safety						
hazard						
Infant Condition						
Recorded. (up to age 2)						
Health History Information						
✓ Questions appropriately asked.						
✓ Responses accurately recorded.						
Immunizations ✓ Assessed and recorded correctly.						
✓ Referrals made (if applicable).						WRO Policy
Referrals made (if applicable).						memo 2001-7
Tobacco						11101110 2001 7
✓ Assessed and recorded correctly.						
✓ Referrals made (if applicable).						
Risks						
✓ All risks were identified & recorded.						Ch 3 Sec A
✓ High Risk clients referred to						CIT 3 SCC A
Nutritionist for all 6 state HR						
Dietary Assessment						
-						Ch 2 Ann C
✓ Calculated intake accurately						Ch 3 App C
✓ Info recorded correctly						04/44
Care Plan/Nutr ed						246.11
✓ Completed nutrition education						
accurately						04/40
Food Package						246.10
✓ Appropriate food package selected.						Ch 5
✓ Appropriate pick-up interval.						Ch 5
✓ Appropriate documentation.						246.10 (c)(iii)
<u>Referrals</u>						
✓ Referrals to nutritionist documented						
ANTHROPOMETRICS						WIC University
						Training Manual Ch 4 Sec 2
Height & Weight						CI14 3CC 2
✓ Scales are zeroed and balanced						
before weighing individual						
Infant, child or adult weighed accurately						
✓ Dry diaper						
✓ Light clothing						
✓ Without shoes						
• MITHOR SHOES						



	Helping A	Arizona Families Gro	w Strong	1		
Item	1	2	3	4	5	Policy
✓ Weighed to nearest ounce (adult)						
nearest ¼ pound)						
Infant or recumbent child measured						
accurately?						
✓ Measured on a standardized						
measuring board with non-movable						
headboard and a non-flexible						
footboard						
✓ Length board used for infants &						
children under 24 months or unable						
to stand unassisted						
✓ 2 people measured length						
✓ Both legs are grasped and						
straightened for measurements						
✓ Length measured to nearest 1/8 inch						
Standing child or adult measured						
accurately						
✓ Standing ht used for children over 24						
months & women						
✓ Measured using a wall-mounted steel						
or non-stretched tape with a flat						
headboard						
✓ Heels slightly apart						
✓ Heels, buttocks and shoulder blades						
touching wall						
✓ Eyes straight ahead with arms at						
sides						
✓ Without top hair adornment						
✓ Height is measured to nearest 1/8						
inch						
Bloodwork						Lab Manual
Lab Procedure						
CNW used own ID for Hemocue.						Lab Manuel Ch
Correct site preparation techniques						Lab Manual Ch 2
✓ Cleansed & gloved hands for each						_
test. ✓ Gloves remained on until cuvette						Lab Manual Ch
was disposed.						2
✓ Correct site chosen (middle or ring						Lab Manual Ch
finger, cannot have ring).						5
✓ Cleansed & dried site, site held to						Lab Manual Ch
distend skin.						5
✓ Correct puncture depth, first 2 - 3						Lab Manual Ch
drops wiped, pressure/bandage						5
applied (no bandage under 2 years).						
The state of the s	1	I		1	I	1



	Helping	Arizona Families Gr	ow Strong			
Item	1	2	3	4	5	Policy
Correct collection techniques						Lab Manual Ch
✓ No squeezing/milking to collect						5
blood, other method used.						
✓ Cuvette container with lid on stored						Lab Manual Ch
at room temp.						5
Correct cuvette techniques						Lab Manual Ch 5
✓ Pointed downward.						Lab Manual Ch 5
✓ Filled in one step to front edge, excess blood wiped off.						Lab Manual Ch 5
Checked for air bubbles, discard if present.						Lab Manual Ch 5
✓ Disposed of used supplies properly in Biohazard/Sharps containers/trash						Lab Manual Ch 2
can.						
✓ Disposed of gloves after each test & cleansed hands.						Lab Manual Ch 2
PROGRAM INTEGRITY						
Separation of duties						Ch 7 sec C
Conflict of interest						
Confidentiality observed						
Documentation on file for Physician						Policy Memo
ordered special formula						2004 #1 revised
Food Instrument Printing						
✓ Client eligibility for bi/tri-monthly						
issuance verified before printing food						
instruments.						
 Client signed for food instruments received in clinic. 						



Participant Name/ID#	Explanation of Findings
·	

Appendix G: State Pamphlet Resource Catalog WIC order form

Local Agency:	Date:
	Phone:
	Requested By:

ENG SPAN ENG		
SPAN		
ENG		
SPAN		
IG/SPAN		
ENG		
SPAN		
ENG		
SPAN		
ENG		
SPAN		
EMIA		
1		
ENG		
SPAN		
RUMENT		
ENG		
SPAN		
	RUMENT ENG	RUMENT ENG

Local Agency:	Date:
	Phone:
	Requested By:

Request Amount	Description/Form		QTY Shipped	Back Order
	WIC FORMS AND MATERIALS			
	WIC-74 INTRODUCTORY WIC FOODS CHART			
	WIC-80 WIC CUSTOMER SAVING FLYER	ENG		
	WIC-80s WIC CUSTOMER SAVING FLYER	SPAN		
	WIC-81 CLIENT TRAINING VIDEO	ENG		
	WIC-81s CLIENT TRAINING VIDEO	SPAN		
	WIC-89 VENDOR CONTACT FRIENDLY VSR			
	WIC-90 BI-MONTHLY ENVELOPE			
	WIC-91 PLASTIC ID FOLDER BAGS			
	WIC-92 RAINBOW PAMPHLET	ENG		
	WIC-92s RAINBOW PAMPHLET	SPAN		
	WIC-93 WHY WIC WORKS - LAVENDER			
	WIC-94 WIC WORKSLET US HELP 11" X 17"			
	WIC-94s WIC WORKSLET US HELP 11" X 17"			
	WIC-95 WIC WORKSLET US HELP 20" X 28"			
	WIC-95s WIC WORKSLET US HELP 20" X 28"			
	WIC-96 CHEESE FLYER	ENG		
	WIC-96s CHEESE FLYER	SPAN		
	WIC-97,97s DOCUMENTATION OF INCOME WAIVER E	NG/SPA		
	WIC-99,99s WAITING LIST NOTIFICATION ENG	/SPAN		
	WIC-100 FOOD INSTRUMENT STOCK			
	WIC-101 MICR TONER CARTRIDGE, T610,ST925			
	WIC-102 MICR TONER CARTRIDGE, ST9325			
	WIC-103,103S CONSENT/RELEASE FORM ENG/SPA WIC-104 IS YOUR CHILD PROTECTED ENG			

Local	Agency:	Date:
		Phone:
		Requested By:
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Request Amount	Description/Form	QTY Shipped	Back Order
	WIC FORMS AND MATERIALS		
	WIC-104S IS YOUR CHILD PROTECTED SPAN		
	WIC-105 MICROCUVETTES OLD B-HEMOGLOBIN		
	WIC-106 MICROCUVETTES NEW HB 201		

Local Agency	:	Date:
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Request Amount	Description/Form	QTY Shipped	Back Order
	NUTRITION ASSESSMENT FORMS	_	
	N-24a DIETARY ASSESSMENT FORM v o 1-3		
	N-42 LABORATORY CLIENT LOG		
	N-43 HEMOGLOBIN QUALITY ASSURANCE		

Local Agency:	Date:
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	Requested By:

Request			QTY	Back
Amount	Description/Form		Shipped	Order
	BREASTFEEDING MATERIALS			_
	B-10 B.FEED-GETTING STARTED IN 5 STEPS	ENG		
	B-10s B.FEED-GETTING STARTED IN 5 STEPS	SPAN		
	B-12 HELPFUL HINTS ON BREASTFEEDING	ENG		
	B-12s HELPFUL HINTS ON BREASTFEEDING	SPAN		
	B-14 20 GREAT REASONS TO BREAST-FEED	ENG		
	B-14s 20 GREAT REASONS TO BREAST-FEED	SPAN		
	B-55 COTTON NURSING PADS			
	B-60 AMEDA-EGNELL ONE HANDED MANUAL			
	B-61 AMEDA-EGNELL DUAL HYGIENIKIT			
	B-62 MEDELA DUAL HYGIENIKIT			
	CSFP FORMS		T	
	CSFP-1 CSFP ID CARD			
	CSFP-5 COUNSELING FORM			
	CSFP-200 NOTICE TO REAPPLY	ENG		
	CSFP-200s NOTICE TO REAPPLY	SPAN		
	CSFP-2000 HOME DELIVERY FORM			

Local Agency:	Date:
	Phone:
	December 1 D
	Requested By:

Request Amount	Description/Forms		QTY Shipped	BACK Order
	EDUCATIONAL MATERIALS			
	E-15.15s AND JUSTICE FOR ALL POSTER E	ENG/SPAN		
	E-18 IRON FOR STRONG BLOOD	ENG		
	E-18S IRON FOR STRONG BLOOD	SPAN		
	E-19 GIVE YOUR BABY A HEALTHY START	ENG		
	E-19S GIVE YOUR BABY A HEALTHY START	SPAN		
	E-20 BE A HEALTHY MOM	ENG		
	E-20S BE A HEALTHY MOM	SPAN		
	E-22 FEEDING YOUR BABY BIRTH TO 8 MONT	HS ENG		
	E-22S FEEDING YOUR BABY BIRTH TO 8 MONT	HS SPAN		
	E-23 FEEDING YOUR BABY 6 TO 12 MONTHS	ENG		
	E-23S FEEDING YOUR BABY 6 TO 12 MONTHS	SPAN		
	E-24 FEEDING YOUR 1 TO 3 YEAR OLD	ENG		
	E-24S FEEDING YOUR 1 TO 3 YEAR OLD	SPAN		
	E-25 FEEDING YOUR 4 TO 5 YEAR OLD	ENG		
	E-25S FEEDING YOUR 4 TO 5 YEAR OLD	SPAN		
	E-26 TIME FOR A CUP	ENG		
	E-26S TIME FOR A CUP	SPAN		
	E-27 YOU HAVE A CHOICE, BUT YOUR BABY DOESN'T	ENG		
	E-27S YOU HAVE A CHOICE, BUT YOUR BABY DOESN'	T SPAN		